

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

For Official Use

IN THE MATTER OF

**Statement of Emergency
Protective Placement**

Date of Birth

Case No. _____

I am a ☐ law enforcement officer
☐ fire fighter
☐ guardian
☐ authorized representative of the county department designated under §55.02, Wisconsin Statutes.

I have cause to believe the subject will suffer irreparable injury or death or will present a substantial risk of serious physical harm to others as a result of developmental disabilities, infirmities of aging, chronic mental illness or other like incapacities if not immediately placed.

My belief is based on the following specific facts as observed by me: ☐ See attached

- ☐ The subject is currently under guardianship.
☐ A petition for protective placement will be filed.
☐ A petition for guardianship and protective placement will be filed.

The subject was detained at _____,
Name of Facility
on _____, at _____ ☐ am. ☐ pm.
Date Time

Subject's Street Address	City	County	State
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Signature of Person Making Placement	Name of Department
Name Printed or Typed	Telephone Number